PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450

Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

| appropriate. All further cor indicated unless corrected maintenance fee notification | respondence including the below or directed otherwise is. | Patent, advance or in Block 1, by (a | rders and not a) specifying | a new cor | respondence add | dress; and/or | (b) indicating a ser | parate "FEE ADDRESS" fo | |
|--|---|---|--|--|------------------|-----------------|-------------------------------|-------------------------------|--|
| CURRENT CORRESPONDENCE 22902 75 CLARK & BROI 1090 VERMONT A SUITE 250 WASHINGTON, I | 4 2006 W | | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | | | |
| *************************************** | | TRANS TRA | - 18th O | - | | | | (Depositor's name | |
| | | TRA | DEM | Į | | | | (Signature | |
| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTO | | | OR | ATTOR | NEY DOCKET NO. | CONFIRMATION NO. | |
| 10/820,041 TITLE OF INVENTION: S HAVING A SMALL RADI | 04/08/2004 EALING GASKET FOR M US OF CURVATURE | OUNTING AROU | • | Baratin OR VEHIO | CLE DOOR THA | | 11016-0028 'S AT LEAST ONE | 7325 CORNER | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | | PUE | PUBLICATION FEE | | TAL FEE(S) DUE | DATE DUE | |
| nonprovisional | NO | \$1400 | | | \$300 | | \$1700 | 09/18/2006 | |
| EXAMINER | | ART UNIT | | CLA | CLASS-SUBCLASS | | | | |
| THOMPSON, HUGH B | | 3634 | 4 049-479100 | | | | | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTC/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | | | |
| ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment 15/2806 MRERHE1 08080867 18820841 (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Hutchinson Paris, France 91 FC:1591 1489.09 OP 309.09 OP | | | | | | | | | |
| Please check the appropriate | assignee category or catego | ries (will not be pr | inted on the p | oatent) : | ☐ Individual 〔 | X Corporation | on or other private g | roup entity Governmen | |
| 4a. The following fee(s) are enclosed: ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies | | | | D. Payment of Fee(s): ☑ A check in the amount of the fee(s) is enclosed. ☑ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1088 (enclose an extra copy of this form). | | | | | |
| _ | (from status indicated above | | | | ** | | | | |
| • • | MALL ENTITY status. See | | • • • | | | | ITY status. See 37 (| 10/1 | |
| NOTE: The Issue Fee and P interest as shown by the reco | is requested to apply the Issuphication Fee (if required), ords of the United States Bate | ie ree and Publica vill not be accepted ent and Trademark | tion ree (if ar d from anyone Office. | e other tha | n the applicant; | a registered at | ttorney or agent; or | the assignee or other party i | |
| | Mulas | 1, 12 | | | | | | | |

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

September 14,

Registration No.

33,613

2006

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Christopher W. Brody

Authorized Signature

Typed or printed name